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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 10/429,485 05/05/2003 PAT 6,878,691
 which is a CIP of 10/144,558 05/13/2002 ABN
 This application 10/758,409
 is a CIP of 10/436,622 05/13/2003
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**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 04/24/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 61	INDEPENDENT CLAIMS 2
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ADDRESS
000038473

TITLE
PROCESSES FOR THE PREPARATION OF 6-11 BICYCLIC ERYTHROMYCIN DERIVATIVES

FILING FEE RECEIVED 1119	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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